### FORM D

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

# FORM D





NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION** 

SI	C USE O	NLY			
Prefix   Serial					
D/	ATE RECEI	VED			

Name of Offering (□ che	ck if this is an amendment and na	ame has changed, ar	nd indicate ch	ange.)	7	
High Post Capital, LP						
Filing Under (Check box(es)	that apply):   Rule 504	☐ Rule 505	⊠ Rule 50	06 ☐ Section	4(6) □ ULOE	
Type of Filing:   New	Filing				DDOCECCE	
	A. BASIC	IDENTIFICATIO	N DATA		NO CESSED	
1. Enter the information requ	ested about the issuer				AUC 1 0 2000	
Name of Issuer (□ check	if this is an amendment and nam	e has changed, and	indicate chan	ge.)	400 TO 5004	
High Post Capital, LP				V	THORSON	
Address of Executive Office	s (Number and Str	eet, City, State, Zip	Code)	Telephone Numb	er (Indilination area Code)	
200 Riverside Blvd., #7C,	New York, New York 10069			(212) 579-4835		
Address of Principal Busine	ss Operations (Number and Str	eet, City, State, Zip	Code)	Telephone Number	er (Including Area Code)	
(if different from Executive	Offices)	· · · · · · · · · · · · · · · · · · ·				
Brief Description of Busines	s: To achieve positive rates of	return by investin	g in equity se	curities, equity of	ptions, and to a lesser	
extent certain debt securiti	es, fund of funds and select art	oitrage opportuniti	ies			
Type of Business Organizati					/1 -	
☐ corporation	☑ limited partnership,		□ o	ther (please specif	y): / // / / // // // // // // // // // //	
☐ business trust	☐ limited partnership, t		· .		- VO/19902 >>	
		Month Ye	ear			
Actual or Estimated Date of Incorporation or Organization: 0 5 0 4						
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:						
CN for Canada; FN for other foreign jurisdiction)						

### **GENERAL INSTRUCTIONS**

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. Or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received as that address after the date on which it is due on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

## A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing general partners of partnership issuers; and

Check Box(es)that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partners
Full Name (Last name first, High Post Asset Managen					
Business or Residence Add 200 Riverside Blvd., #7C,		and Street, City, State, Zip ow York 10069	Code)		
Check Box(es)that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partners
Full Name (Last name first, Klarreich, Jason	, if individual)				
Business or Residence Add 200 Riverside Blvd., #7C,		and Street, City, State, Zip ow York 10069	Code)		
Check Box(es)that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partners
Full Name (Last name first,	, if individual)	<del></del>			-
Check Box(es)that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partners
Full Name (Last name first,	if individual)				
-Business or Residence Add	ress (Number	and Street, City, State, Zip	Code)		
Check Box(es)that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partners
Full Name (Last name first,	if individual)		<del></del>		
Business or Residence Add	ress (Number	and Street, City, State, Zip	Code)		<del> </del>
Check Box(es)that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partners
Full Name (Last name first,	if individual)	······································			
Business or Residence Add	ress (Number	and Street, City, State, Zip	Code)		

7. 探访的秘				B. IN	FORMAT	ION ABO	UT OFFE	RING				
l Has the	issuer sold	or does t	ne issuer in	tend to sell	to non-ac	credited in	vestors in th	is offering	າ		Yes	No ⊠
1. 1143 (11.	7135461 3010	, or <b>u</b> ocs t					2, if filing	-				. <del>-</del>
2. What is the minimum investment that will be accepted from any individual?								0,000*				
*Subject to the discretion of the General Partner to reduce such amount.  Yes 3. Does the offering permit joint ownership of a single unit?							No					
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated person of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)								·				
Full Nam	e (Last nam	ie first, it i	ndividual)									
Business or Residence Address (Number and Street, City, State, Zip Code)												
Name of	Associated	Broker or	Dealer		<del></del>					-		<del></del>
	Which Pers "All States						;				🗆	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[N1]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Nam	e (Last nam	ne first, if i	ndividual)									
Business	or Residen	ce Address	(Numbe	r and Stree	t, City, Stat	e, Zip Cod	e)					
Name of	Associated	Broker or	Dealer									
	Which Pers "All States						······································				🗆	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[H!]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[XT]	[UT]	[TV]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Nam	e (Last nam	ne first, if i	ndividual)	<del>-</del>	<u> </u>							
Business	or Residen	ce Address	(Numbe	r and Street	t, City, Stat	e, Zip Cod	e)		<u> </u>	-		
Name of	Associated	Broker or	Dealer	***************************************	· · · · · · · · · · · · · · · · · · ·							
States in Which Person Listed has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)							All States					
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

	Aggregate	Amount
Type of Security Debt	Offering Amount	Already Sol
Equity	\$	\$
Convertible Securities (including warrants	\$	\$
Partnership Interests	\$ <u>100,000,000</u> .	\$ 20,000
Other (Specify)	\$	\$
Total	\$ 100,000,000 .	\$_20,000
Answer also in Appendix, Column 3, if filing under ULOE		
Enter the number of accredited and non-accredited investors who have purchased securities in this affering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, adjuste the number of persons who have purchased securities and the aggregate dollar amount of	,	
	,	Aggregate Dollar Amou
ffering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, adicate the number of persons who have purchased securities and the aggregate dollar amount of neir purchases on the total lines. Enter "0" if answer is "none" or "zero".	, f Number Investors	Dollar Amou of Purchase
ffering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, adicate the number of persons who have purchased securities and the aggregate dollar amount of neir purchases on the total lines. Enter "0" if answer is "none" or "zero".  Accredited Investors	Number Investors	Dollar Amou
ffering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, adicate the number of persons who have purchased securities and the aggregate dollar amount of neir purchases on the total lines. Enter "0" if answer is "none" or "zero".  Accredited Investors	Number Investors	Dollar Amou of Purchase
ffering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, adicate the number of persons who have purchased securities and the aggregate dollar amount of neir purchases on the total lines. Enter "0" if answer is "none" or "zero".  Accredited Investors	Number Investors	Dollar Amou of Purchase
ffering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, adicate the number of persons who have purchased securities and the aggregate dollar amount of neir purchases on the total lines. Enter "0" if answer is "none" or "zero".  Accredited Investors	Number Investors	Dollar Amou of Purchase
ffering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, adicate the number of persons who have purchased securities and the aggregate dollar amount of neir purchases on the total lines. Enter "0" if answer is "none" or "zero".  Accredited Investors	Number Investors 1	Dollar Amou of Purchase \$20,000 \$
Accredited Investors	Number Investors  1  Type of	Dollar Amou of Purchase \$20,000 \$ \$ Dollar Amou
Accredited Investors	Number Investors 1	Dollar Amou of Purchase \$20,000 \$
Accredited Investors	Number Investors  I  Type of Security	Dollar Amou  of Purchase \$20,000  \$  Dollar Amou Sold
Accredited Investors	Number Investors  1  Type of Security N/A	Dollar Amou  of Purchase \$20,000  \$  Dollar Amou Sold \$N/A

Transfer Agent's Fees.....

Printing and Engraving Costs.....

Legal Fees.....

Accounting Fees.....

Engineering Fees.....

Sales Commissions (specify finder's fees separately).....

Total.....

Other Expenses (identify): Miscellaneous offering-expenses

□ \$

**X** \$

□ \$

□ \$

**⊠** \$

25,000

10,000

15,000

50,000

□ \$

C. OFFERING PRICE, NUMB	ER OF INVESTORS, EXPENSES AN	D US	SE OF PROCE	EDS	
b. Enter the difference between the aggregate Question 1 and the total expenses furnished in response the "adjusted gross proceeds to the issuer"	ceeds to the issuer used or proposed to be any purpose is not known, furnish an esterotated of the payments listed must equ	ence i	s  d e	\$	99,950,000
Salaries and fees	Pachinery and equipment		Payments To Officers, Directors, & Affiliates  \$		Payments To Others  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$
Column Totals  Total Payments Listed (column totals added)			\$ \(\Sigm\) \$99	⊠ ,950,0	\$ <u>99,950,000.</u> 00 .
	D. FEDERAL SIGNATURE	ja k	One of the feeding and 1000.		
The issuer has duly caused this notice to be signed be ollowing signature constitutes an undertaking by the information furnished by the issuer to any non-accr	issuer to furnish to the U.S. Securities (	Comr	nission, upon w		
Issuer (Frint or Type)  High Post Capital, LP.	Signature		D	atc {	3/3/04
Name of Signer (Print or Type)	Title of Signer (Print or Type)		L		
Jason Klarreich	President, High Post Asset Managem	ent,	LLC (the Gene	ral Par	rtner)

ing parang finansia di personali salah silah sebesah sebesah sebesah sebesah sebesah sebesah sebesah sebesah s Labah	
Express USA Airbill Fadex 8464 2451 1194	. C215 Saiderscopy
7 Please print and press hard. 8/5/04 Sender's FedEx Account Number 1012-7612-0	4a Express Package Service  Packages up to 150 lbs.  Delivery commitment may be later in some stress.  FedEx Priority Overnight Next business morning Later in expression and later in some stress.  FedEx First Overnight Next business morning Later in expression and later in some stress.
ler's Martin A. Hewitt, Esq. Phone (212) 508-6700	FedEx 2Day FedEx Express Saver Third bishiess day FedEx foreignes not available. Minimum charge the-pound rate  Ab Express Freight Service  Packages over 150 lbs.
ess 900 3RD AVE	Ab Express Freight Service  Packages over 150 lbs.  Definery commitment may be date in some areas.  FedEx 1Day Freight  Second business day  FedEx 3Day Freight  Second business day  Cell for Continuation.
NEW YORK State NY ZIP 10022-4728	5 Packaging  *Declared value limit \$500  *EedEx Envelopa*  FedEx Pak* Includes FedEx Small Pak, FedEx Includes FedEx Small Pak FedEx Includes FedEx Small Pak Includes FedE
r Internal Billing Reference 15734.0099  icharacters will appear on invoice.  25734.0099  Phone	6 Special Handling saturday lacture FedEx address in Section 3.  SATURDAY Delivery Available ONLY for FedEx Profits Cody, FedEx Profits Overnight on FedEx Location NOT Available for FedEx Location NOT Available on FedEx Profits Overnight FedEx Cody select Sections Section Secti
United States Securities and  Pany Exchange Commission	Does this shipment contain dangerous goods?  One box must be checked.  No Yes Shipper's Declaration or recurred or recurred or recurred or recurred.
BSS 450 Fifth Street, N.W.  ID at FedEx location, print FedEx address.  We cannot deliver to P.O. boxes or P.O. ZIP codes.	7 Payment Bill to: Enter FedEx Acct. No. or Credit Card No. below.  Sender Recipient Third Party Credit Card Cash/Chack No. in Section I be blad.
Dept/Floor/Suba/Room	FedEr Acet, No. Exp. Cndd Card No. Date
Washington State DC ZIP 20549	Total Packages Total Weight Total Declared Value!  \$ .00 FedEx Use Only
Try online shipping at fedex.com  By using this Adrill you egree to the service conditions on the back of this Adrill	8 Release Signature sign to euthorize delivery without obtaining signature.    Release Signature   Sign to euthorize delivery without obtaining signature.   Sign to euthorize delivery without obtaining signature.
Ouestions? Visit our Web site at fedex.com  Or call 1:800.Go.FedEx® 800.463.3339.	By signing you authorize us to defiver this shipment without obtaining a signature and agree to indemnify and hold us harmless from any resulting claims.  5 47  SRS-Rev. Date 5:03 -Part #157610 -© 1994-2003 FadEx-PRINTED IN U.S.A.